

FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Davie Sports PAC
Name
(2) 4301 SW 105 Ave
Address (number and street)
Davie FL 33328
City, State, Zip Code

OFFICE USE ONLY

01-05-12P12:10 RCVD *ll*

☐ CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

☐ Candidate (office sought): _____

☒ Political Committee

☐ Committee of Continuous Existence

☐ Party Executive Committee

☐ Electioneering Communication

☐ CHECK IF PC HAS DISBANDED

☐ CHECK IF CCE HAS DISBANDED

☐ CHECK IF NO OTHER ELECTIONEERING
COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 10 / 1 / 2011 To 12 / 31 / 2011 Report Type Q4

☐ Original ☐ Amendment ☐ Special Election Report ☐ Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 20.00

Loans \$ _____

Total Monetary \$ 20.00

In-Kind \$ _____

(7) EXPENDITURES THIS REPORT

Monetary
Expenditures \$ 15.00

Transfers to Office
Account \$ _____

Total
Monetary \$ 15.00

(8) Other Distributions
\$ _____

(9) TOTAL Monetary Contributions To Date
\$ 1185.00

(10) TOTAL Monetary Expenditures To Date
\$ 1111.50

(11) CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true,
correct, and complete.

(Type name)

☐ Individual (only for
electioneering commun.) ☒ Treasurer ☐ Deputy Treasurer

Michael A. Smith
Signature

I certify that I have examined this report and it is true,
correct, and complete.

(Type name)

☐ Candidate ☒ Chairperson (only for PC, PTY &
electioneering commun organization)

Michael A. Smith
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES
(1) Name Davie Sports PAC (2) I.D. Number _____

(2) I.D. Number _____

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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name

Davie Sports PAC

(2) I.D. Number

(3) Cover Period

through

(4) Page

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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES